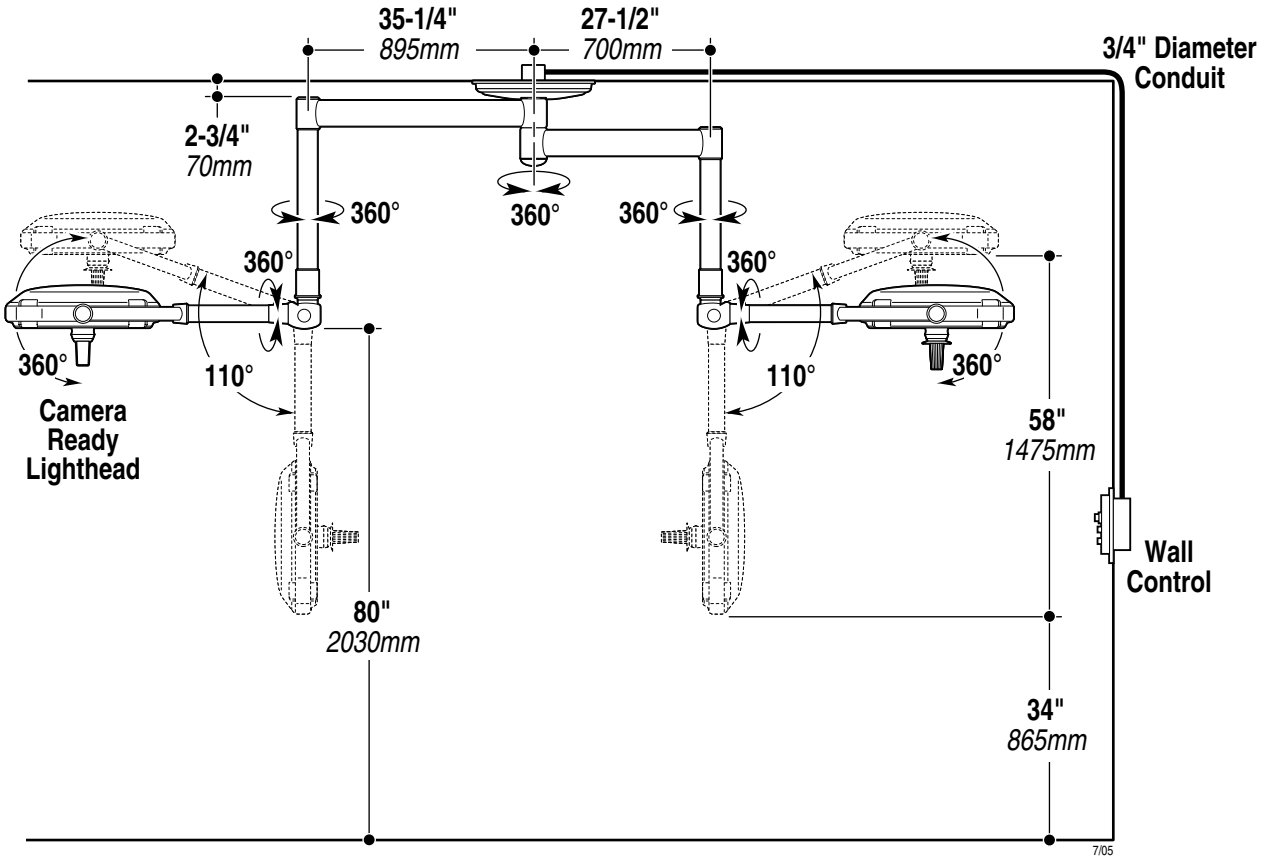
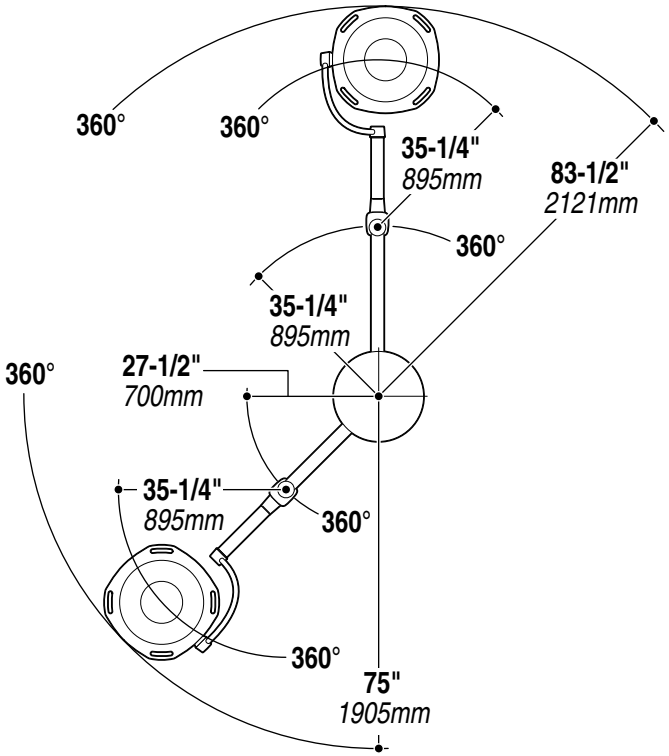
ELEVATION VIEW



PLAN VIEW



APPROVED BY: _____

FACILITY: _____

DATE: _____